Yukon Influenza Surveillance Report

Influenza Season: 2010-2011 Summary Report

FluWatch Weeks 35-38 (August 29 - September 25, 2010)

Il dara are provisional and subject to change as information is received

FluWatch Weeks 35-38 Report 1

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Report Highlights

This surveillance report, produced by YCDC, summarizes influenza activity in the Yukon for the 2010-2011 season, during weeks 35-38 (August 29 – September 25, 2010).

2010-2011 FluWatch Weeks Calendar: http://origin.phac-aspc.gc.ca/fluwatch/10-11/10-11cal-ene.php

During weeks 35-38, surveillance indicators continue to demonstrate low to no levels of influenza activity.

Pandemic H1N1 (pH1N1) Severe Outcomes

This section will update any severe outcomes such as hospitalizations and deaths that are attributed to influenza during the 2010-2011 season.

During weeks 35-38 there have been no hospitalizations or deaths due to influenza.

FluWatch Reporting

Based on FluWatch activity level definitions, Yukon has reported the following activity levels: FluWatch activity level definition: http://origin.phac-aspc.gc.ca/fluwatch/10-11/deff0-11-cng.php

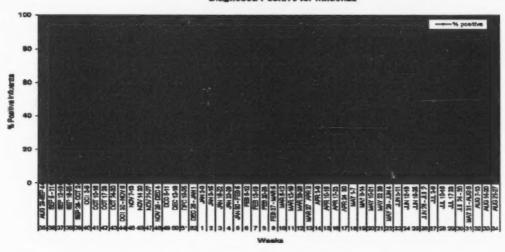
Weeks 35-38

No laboratory-confirmed influenza detections in the reporting week, however, sporadically occurring ILI may be reported

Laboratory Reports

There were no influenza positive results during weeks 35-38.

Percentage of Respiratory Specimens (Submitted for testing in Yukon) Diagnosed Positive for Influenza



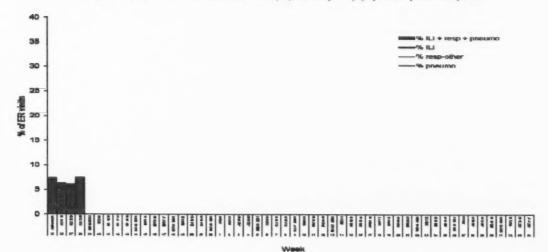
Communities with Laboratory Confirmed Influenza

There have been no community residents with a positive influenza result during weeks 35-38.

Whitehorse General Hospital Emergency Visits

During weeks 35-38 the proportion of presentations to the WGH emergency department for respiratory symptoms including ILI is depicted below.

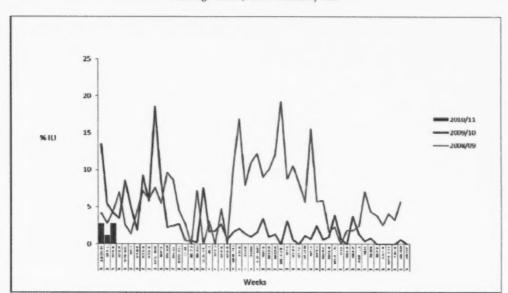
Percent of WGH ER visits with influenza-like illness (ILI), other respiratory symptoms, or pneumonia by week



Sentinel physicians/sites

The percentage of patients presenting to sentinel physicians or sites with ILI during weeks 35-38 was between 0%-2.8%. During the 2008/09 season, an average of five sentinel reports were received each week. A new recruitment of sentinel physicians and sites occurred in July 2009. There are presently 18 sentinel physicians/sites across the territory; during weeks 35-38 an average of 7 (40%) sentinels reported. Yukon's sentinel surveillance system is comprised of all rural Community Health Centres, the Whitehorse General Hospital and participating physicians.

(FluWatch Sentinel Surveillance Information http://origin.phac-aspc.gc.ca/fluwatch/sent-eng.php)



Percentage with ILI, visits to sentinels by week

Antivirals

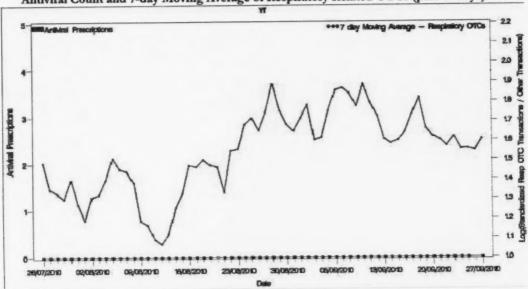
A surveillance report has been developed and produced by Rx Canada (www.RxCanada.ca) under the direction of representatives of the Public Health Agency of Canada. The purpose of this report is to monitor the progression of influenza across Canada. It consists of summary data tables, graphs, and commentary on daily and weekly antiviral prescriptions (Tamiflu and Relenza) and OTC medication relevant to influenza-like-illness (ILI). Standardized core data sets of daily antiviral and OTC drug sales from participating retail pharmacy chains and stores are processed, prepared, and reviewed for data quality assurance by the project team.

Obtained from: H1N1 Influenza Event: Antiviral and OTC Surveillance Daily and Weekly Report: Sep 21–Sep 27, 2010.

Yukon has three Whitehorse based retail pharmacies that are contributing data to this national report. Complete reports can be accessed from: https://www.rxcanada.ca/en/phac/

The following graph represents the 7-day Moving Average of Respiratory product OTC sales (adult + child products) standardized by daily sales of other OTC products (other + analgesics) for Yukon. Antiviral count or 7-day Moving Average of Antiviral prescriptions versus all other prescriptions is also shown.

Antiviral Count and 7-day Moving Average of Respiratory Related OTCs (past 60 days): YT

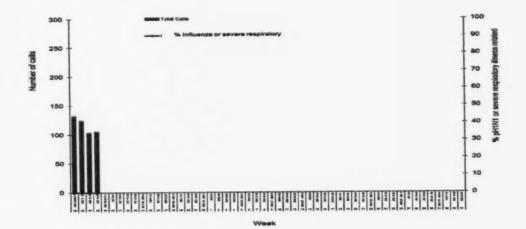


Obtained from: H1N1 Influenza Event: Antiviral and OTC Surveillance Daily and Weekly Report: Sep 21-Sep 27, 2010.

HealthLink 811

The graph below shows the percentage of calls related to influenza or severe respiratory illness.

Number of calls and percentage related to influenza or severe respiratory illness by week



Outbreaks

Definitions of ILI/Influenza outbreaks for the 2010-2011 season http://origin.phac-aspc.gc.ca/fluwatch/10-11/def10-11-eng.php

Facilities

No facility outbreaks have been reported during weeks 35-38.

Schools

There have been no reports of school outbreaks reported during weeks 35-38.

Obtained from: FluWatch - Public Health Agency of Canada

August 29 to September 11, 2010 (Weeks 35 & 38) http://origin.phac-aspc.gc.ca/fluwatch/10-11/w36 10/index-eng.php

Summary of FluWatch Findings for the Week ending September 11, 2010

Overall influenza activity in Canada remained very low with most of the influenza surveillance regions having reported no activity. No influenza outbreaks have been reported since March 2010 and ILI consultation rates are still within the expected levels for this time of the year.

Only three specimens (out of 1,839) were tested positive for influenza in weeks 35-36: two specimens were reported as influenza A/H3N2 (AB) and one was reported as influenza B (QC).

In the Southern Hemisphere, Australia and Chile, which had relatively low level of influenza transmission so far, are now experiencing late increases. While New Zealand reported intense activity in some localized areas, the flu season appears to have peaked. As well, in South Africa, the influenza activity has been decreasing for a few weeks. With the exception of South Africa and Chile, the pandemic influenza A/H1N1 strain predominated with some A/H3N2 and B viruses. The previous seasonal A/H1N1 viruses have been inexistent. In all countries so far, influenza activity levels have been lower than the 2009 season during their first pandemic waves (Reference: ECDC).

Canadian situation

Paediatric Influenza Hospitalizations and Deaths

In weeks 35-38, no laboratory-confirmed influenza-associated paediatric (18 years of age and under) hospitalizations were reported through the Immunization Monitoring Program Active (IMPACT) network.

Adult Influenza Hospitalizations and Deaths

During weeks 35 and 36, no new laboratory-confirmed influenza-associated adult (16 years of age and older) hospitalizations were reported through the Canadian Nosocomial Infection Surveillance Program (CNISP) from 17 reporting sites in week 35 and 7 in week 36.

Sale of antivirals (AV)

During weeks 35 and 36, little change in antiviral prescription sales were observed among provinces and territories. Daily and weekly antiviral data at the Health Region level demonstrated low antiviral prescription rates among all Health Regions for the report weeks. All the antivirals sold from participating retail pharmacy chains and stores during the past two weeks were Tamiflu except one Relenza. Respiratory-related over the counter transactions demonstrated increased among all provinces and territories.

Antigenic Characterization and Antiviral Resistance

No report received this reporting week.

International influenza update

Global information

WHO: Worldwide, influenza activity is currently most intense in the temperate areas of the Southern Hemisphere and southern Asia. In the Southern Hemisphere, Australia and Chile, which had relatively low level of influenza transmission so far, are now experiencing late increases. While New Zealand reported intense activity in some localized areas, the flu season appears to have peaked. As well, in South Africa, the influenza activity has been decreasing for a few weeks. With the exception of South Africa and Chile, the pandemic influenza A(H1N1) strain predominated with some A(H3N2) and B viruses. The previous seasonal A(H1N1) viruses have been inexistent. In all countries so far, influenza activity levels have been lower than the 2009 season during their first pandemic waves.

http://www.who.int/csr/disease/influenza/2010 09 10 GIP surveillance/en/index.html

http://ecdc.europa.eu/en/activities/sciadvice/Lists/ECDC%20Reviews/ECDC_DispForm.aspx?List=512ff746%2D7d4%2D4ad8%2Db6d6%2Dbf0f23083f30&ID=942&RootFolder=%2Fen%2Factivities%2Fsciadvice%2FLists%2FECDC%20Reviews

Geographic update

Southern hemisphere

Australia: Australia has reported increasing influenza activity throughout August and September, though recently, the numbers of patients seen in emergency departments for influenza-like illness seem to have levelled off in parts of the country. Overall, influenza activity is well below the activity observed in the winter of 2009. Levels of influenza and influenza-like illness (ILI) in the community have continued to increase through all surveillance systems this reporting period and highlight a late start to the influenza season compared to previous years. The most commonly identified influenza virus in Australia is pandemic H1N1 2009, though influenza type B is also being detected.

http://www.who.int/csr/disease/influenza/2010_09_10_GIP_surveillance/en/index.html, http://www.healthemergency.gov.au/internet/healthemergency/publishing.nsf/Content/ozflucurrent.htm

New Zealand: In New Zealand, influenza activity has decreased in the last week of August, although activity is still well above baseline levels and with significant regional differences. The majority of influenza detections have been characterized as pandemic H1N1 2009. Levels of influenza transmission in 2010 are below 2009 levels nationally but have exceeded 2009 in some localized areas of the country. http://www.who.int/csr/disease/influenza/2010-09-10-GIP surveillance/en/index.html, http://www.surv.esr.cri.nz/PDF surveillance/Virology/FluWeekRpt/2010/FluWeekRpt201036.pdf

Chile: Chile reported on a sharp increase in respiratory disease activity in the last two weeks. The level of activity in Chile in September is very unusual for this time of the year, as the country usually experiences a peak of respiratory disease in June and July. The pandemic H1N1 2009 virus has been the most commonly detected influenza virus so far this season but in the recent weeks there has been a shift towards influenza virus type B and influenza A/H3N2, with a decreasing proportion of pandemic H1N1 2009. Respiratory syncytial virus

transmission has also been widespread and intense, primarily affecting young children. http://www.who.int/csr/disease/influenza/2010_09_10_GIP_surveillance/en/index.html

Northern hemisphere

India: India is still experiencing a country-wide outbreak of H1N1 (2009) with active transmission and a substantial number of fatal cases in several states across the country. http://www.who.int/csr/disease/influenza/2010_09_10_GIP_surveillance/en/index.html

United States: No further influenza surveillance reports will be published by the CDC for the 2009-2010 influenza season (last report was in week 20). The next report will be for week 40 (week ending October 9, 2010) during the 2010-2011 influenza season. http://www.cdc.gov/flu/weekly/index.htm

Europe: During weeks 34 and 35, low influenza activity was notified by all 16 reporting countries; sporadic activity was only reported by Cyprus and the UK (Wales). An increasing trend was observed by Estonia, Hungary and Poland. During those two weeks, one influenza B virus was detected from sentinel specimens (the Netherlands) and three 2009 pandemic H1N1 2009 viruses were isolated from non-sentinel specimens in Spain and in Poland.

http://ecdc.europa.eu/en/publications/Publications/100910 SUR Biweekly Influenza Surveillance Overvie w.pdf

Influenza Web Sites

Yukon H&SS http://www.hss.gov.yk.ca/

PHAC http://www.phac-aspc.gc.ca/index-eng.php
FluWatch (PHAC) http://origin.phac-aspc.gc.ca/fluwatch/

BCCDC Influenza Information http://www.bccdc.ca/dis-cond/a-z/f/Flu/default.htm

US CDC http://www.cdc.gov/flu/

WHO http://www.who.int/topics/influenza/en/

BCCDC Influenza Surveillance Report

http://www.bccdc.ca/discond/DiseaseStatsReports/influSurveillanceReports.htm

Acronyms

WHO

BCCDC
BC Centre for Disease Control
CDC
Centres for Disease Control (US)
ILI
Influenza-Like Illness
OTC
Over the counter
PH1N1
Pandemic H1N1 influenza or swine origin influenza
PHAC
Public Health Agency of Canada

World Health Organization



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